

March 22, 2001

Mayor Wesely and City Council City of Lincoln City County Building Lincoln, NE

Mayor Wesely and Members of the City Council:

An investigation has been made regarding the application of Levy Premium Foodservice Limited Partnership d.b.a. Levy Restaurants at Haymarket Park, 999 North 6th Street requesting a class I liquor license for this location.

Levy Premium Partnership information has been included in this file for your review.

This location will be the baseball stadium for Lincoln Professional Baseball Inc.

Levy Premium Partnership has requested that Rodney Rossman be approved as the manager of this liquor license.

Background information on the applicant is as follows:

Rodney Rossman was born April 3, 1968. He attended the University of Nebraska graduating in 19932

Rodney Rossman employment history is as follows:

1989 – present Cook, Bartender, Manager /P.O. Pears Lincoln, NE. 1994 – 1995 Bartender, Manager / Mulligans Lincoln, NE.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police





Inv Fosler 843 Date 3 121101

NEBRASKA LIQUOR CONTROL COMMISSION

March 15, 2001

Forrest D. Chapman

P.O. Box 95046

Executive Director 301 Centennial Mall South, 5th Floor

> Lincoln, Nebraska 68509-5046 Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (ITTY)

Levy Restaurants AT Haymarket Park 27804 CLass I 20

Dear Local Governing Body:

City Clerk

555 S 10th

Lincoln NE

Mike Johanns

Governor

County/City Bldg

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

68508

1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose NOT to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- A citizens protest; or 2)
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Licensing Division

Enclosures

Rhonda R. Flower Commissioner

R.L. (Dick) Coyne Chairman

Bob Logsdon Commissioner

An Equal Opportunity/Affirmative Action Employer

FORM 35-4001 REV. 12/99

Printed with soy ink on recycled paper

APPLICATION FOR LICENSE

City Clex

Nebraska Liquor Control Commission, PO Box 95046, 301 Centennial Mall So.

RECEIVED

Lincoln. NE 68509-5046. Phone: (402) 471-2571 Fave EVELO 4/16 + 4/30

MAR - 6 2001

STRUCTIONS: All applications must be typewritten and submitted in triplicate to: Nebraska Equor Control Commission, P.O. Box 95046, Lincoln NE 68509. Unclude: 9. Applicable fees pryable to Liquor Control Commission. 2. Copy of birth certificate or naturalization papers proving S. citizenship for each individual and spouse named on application. Corporate stockholders not coluded 3. Lease or proof of ownership. Statute 53-131.01(2). NEBRASKA LIQUOR CONTROL COMMISSION

NEBRASKA LIQUOF CONTROL COMMISSION

工50877

CEY22 OF PICEWSE LO	R WHICH APPLIC	CATION IS MADE.	AND LIST OF FEES FOR EAC	н
Class of License (Check applicable class)	K WHICH AT LIC	Registration Fee	License Feca	Corporate Surety Bond
A Beer, On Sale Onix - Inside Corporate Limits		s: \$45,00	Collected 21 Local Level	exempt
F Beer, On Sale Oniv - Outside Corporate Limit	15	45.00	Collected 21 Local Level	exempt
B Beer, Off Saie Onix - Inside Corporate Limits		45.00	Collected at Local Level	exempt
E Begr. Off Sale Oniv-Outside Corporate Limit		45. <u>00</u>	Collected at Local Level	exempt
1 Wine, Beer, On Sale Only - Inside Corp. Limi		45. <u>00</u>	Collected at Local Level	exempt
1 Spirits, Wine, Beer, On Sale Only -Inside Con		45.00	Coilegree at Lucal Level	= ११ वत्ता हा
D Spirits, Wine, Beer, Off Sale Only-Inside Con	p. Limits	45.00ls		exemp!
C Spirits, Wine, Beer, On and Off Sale-Inside C	orp. Limits	45.00	Collected at Local Level	exempt
Do you wish same one restriction (Lottery)? = \		<u> </u>		
M Bonte Club (Spirits, Wine, Beer, On Sale)	<u> </u>	45,001	- Collected at Local Level	exempl
H Nonprofit Corporation		45 <u>.00</u>	Confected at Local Level	exempt
K Wine Only, Off Sale		45.00	Collected at Local Level Secure Collected at Local Level From the Collected at Level From the Col	exempt
O Boat		45.00	\$50.00 11 \$160 to \$1000	*10,000 minimum
V Manufacturer of Beer See Statute §53-124)		45.00	Vanes \$100 to \$1000	10.039 пиния
Wine & Distilled Spirits		1 2 00	\$500.00	/ *5,000 minutum
X Wholesale Louer		45.00	\$250.00	*5,009 minimum
W. Wholesale Beer	<u> </u>	45 <u>.00</u> 45 <u>.00</u>	\$250.00	*1,000 minimum
2 Y Farm Winery		45.00	5750 60	#1 000 minimum
Conf. Brewert Brew Publi			TE SURETY BOND INFORMATIO	N.
Type of Application Being Applied for (place appropriate number in 20x) 1=Individual License Requires Form 1 to be Attached 2=Partnership License Requires Form 2 to be Attached	Start Date Month/L	or Classes L. V. W. X. V.	*If tax per month exceed as listed above you must the amount to your estin	rfile a bond increasing
3=Corporate License Requires Forms 3 & Manager Application to be Attached				
Forms 3 & Manager Application to be Attached PRI	EMISE INFORMAT	ITON - Must be com	plete by all applicants Telephone Number	er
Forms J & Manager Application to be Attached		TION - Must be com	plete by all applicants Telephone Number	ef
Forms 3 & Manager Application to be Attached PRE			Telephone Number State of Mail from	m the Commission
Forms 3 & Manager Application to be Attached PRE Trade Name LEVY RESTAURANTS AT HAYMAR		2) Mailing Addre	Telephone Number	m the Commission Zip Code: 606
Forms J & Manager Application to be Attached PRE Trade Name LEVY RESTAURANTS AT HAYMAE 1) Street Address of Proposed Licensed Premise		2) Mailing Addre	Telephone Number	m the Commission Zip Code: 600 uite 400 Chicago

If you lease the building of Month/Day/Year		OPY OF	y? Y Are you fi	Do you own the building and real which a license is sought? If own copy of deed or sales contract d ownership. Y=Yes N=No lling a temporary agency agreement, wherehallows you to operate on their license? N=No If yes, attach copy	ned, submit a lemonstrating N
-	THROUGH LICENSE	YEAR	· · · · · · · · · · · · · · · · · · ·		
	DESCRIPTIO	N AND DIAGRAM OF T	HE STRUCTUR	E TO BE LICENSED	·
storage areas, basemen a portion of the building include dimensions (len- linensed area. No blue p	aw the area to be licensed. t, sales areas and areas of consists to be covered by the license that width) of the entire built or ints will be accepted. Be subser of stories in the building that have been decided as the building that have been decided	onsumption. If only se, you must still Iding, as well as the are to indicate the) lot	EXAMPLE: East portion Approx. 50'x to of main floor of 3 story building plus bases 50' at the East end. The area outlined in red what the baseball field; the first seating, approximately 650' second level of seating, approximately 650' x 700' x 100' x 700' x the softball field, approximately 650' x 450' including seating promanade located between the approximately 100' x 700'; portion of the parking area approximately 50' x 200'.	ich includes st level of x 700'; the proximately 550' x 100' mately ng; the he two field and a small

LEGAL DESCRIPTION OF PREMISES TO BE LICENSED

See Attachment #2

INFORMATION REQU	RED		
1. READ CAREFULLY-ANSWER FULLY AND ACCURATELY Has anyone who is a party to this application, or their spouse, ever been convicted of, or pled guilty to any criminal charge? Criminal charge means any charge alleging a	YES	NO	Explanation/Comments
or pled guilty to any criminal charge? Criminal charge means any charge alleging a violation of a Federal, State or local law or ordinance. List the nature of the charge, where the charge occurred and the year and month of the conviction or guilty plea. Also list any charges pending at the time of this application.		х	
2. Are you buying or leasing the business of a present licensee? If buying, give the name of the licensee selling to you and submit a signed copy of the sales agreement listing furniture, fixtures, and their assigned values. If leasing, include a signed copy of the lease		X	

if you are duying the dusiness of a present licensee, are you assuming the present	YES	NO	Explanation/Comments
if you we during the dusiness of a present ficensee. We you become any or any o		X	
Are you buying all the alcoholic liquor stock of the present license? If yes attach inventor, including brand names and container sizes of the stock to this plication. If no please explain.		Х	New baseball park
Are fixtures, furniture, equipment or stock encumbered? If YES, by whom? clude inventory or any property owned by other party		х	
Are you borrowing any money to establish or operate this business? If yes, list the crown, Bank or financial institution borrowed from and the amount borrowed, clude a copy of all contracts, promissary notes or any other agreements for payment.		x	
List the name and address of the primary bank/financial institution to be used by the business, include any account numbers. Furnish the account numbers of all hecking, savings or other accounts and the names of individuals authorized to write hecks, make denosits or withdrawals on such accounts. Names: Andrew Landret Weber, Robert Seiffert, and Steven Luebbering	sing,		Bank of America 231 South LaSalle Street Chicago, IL 60697 Account #
B. Does the premises require remodeling or construction? If YES, give completion ate.	Х		June 1, 2001
Will any person or persons other than named on this application (partners, corporate officers, directors) have any interest or ownership directly or indirectly in his business? If YES, explain.	x		LINCOLN PROFESSIONAL BASEBALL, INC.
10. Does anyone named on this application, including corporate officers or tockhoiders, hold a current Nebraska Alcoholic Beverage License? If YES, list ticenses and date acquired.		х	
11. Were you the owner, or partner, or an officer of a corporation, on any previous license need in Nebraska or any other state. If YES, list all previous licenses & locations field.	х		SEE ATTACHMENT #3
12. If YES was your previous license canceled or revoked by the Liquor Control Commission?			K
13. Do you intend to manage the business yourself? If filing as a corporation, this question applies to the manager applicant. If other than a corporation how many he do you intend to be present in the licensed establishment, supervising?	ours 2	(
14. Have all persons listed on this application provided proof of citizenship, birth certificate. or naturalization papers? (Not applicable to Corporate Applications)	_ ;	2	
15. Is the premises within 150 feet of any church, school, hospital, home for aged indigent persons, or for veterans, their wives or children or within 300 feet of a college or university campus? (Sec §53-177) IF YES, ineligible; unless premises been licensed at least 2 years continuously prior to a new application.	had		X
16. Identify each type of business or activity proposed to be operated in conjunct entertainment) and indicate the present or future public convenience or necessity. Provide all food and/or beverage at the following concession stands, and lounge.	willer w	ii oe pre	TIGES TOT IT & TREATISE IS EARTHOUGH
17. Describe the nature of the neighborhood or community immediately surroun The general area where Haymarket Park is loca residential community adajacent to Park (See	ted is attacl	lar;	gely industrial with an older #4 for complete details).
18. Are the required fingerprint card(s) and the proper feets) included with this fingerprints & fees are received by the Commission.			
19. Are you a law enforcement officer in any capacity? If yes, list your agency 25%. Statute §53-125(15) ☐ YES ☒ NO	and dutic	s (only e	eligible if NOT a manager, officer or stockholder of over

20. Principal Residence Since Age 18. All individu complete, It necessary, continue on separate sheet.	usis, partners, stockho	lders owning more:	nan 25% stock, chief executive officer, and spouses must
NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
See Attachment #1 Exhibit A			
Andrew Lansing and Ellyn Lansing	(wife)		
Lawrence Levy and Carol Levy (Wi	fe)		
PER	SONAL OATH AND	CONSENT TO INV	ESTIGATION
(Ch. 3-002.07) Nebraska Liquor Act/Rules & STATE OF NEBRASKA Tilinois COUNTY OF Cook The above individual(s), being first duly sworn upon ma.e(s) the above and foregoing application, that sai false statement is made in any part of this application Nebraska Liquor Control Act. The undersigned applicant(s) hereby consent(s) to an itax records (State and Federal), and bank or lendin applicant(s) or spouse(s) may have against the Nebrasaid information to the Nebraska Liquor Control Comin furtherance of the application investigation or any	oath, depose(s) and stated application has been at the applicant(s) share girstitution records, a saska Liquor Control Commission. Any document other investigation share than and acknowledge.	ers) that the undersigned and that the control and that the control deemed guilty of ackground including ack ground including and said applicant(s) amission, the Nebra s or records for the public and license issued	er if a partnership, all partners and spouses must sign and if a duses must sign. Full names only, initials not acceptable. gned is are the applicant(s) and/or spouse(s) of applicant(s) who tents thereof and all statements contained therein are true, if any perjury and subject to penalties provided by law. (§53-131.01) all records of every kind and description including police records, and spouse(s) waive(s) any right or causes of action that said ska State Patrol, and any other individual disclosing or releasing roposed business or for any partner or stockholder that are needed lately upon demand to the Nebraska Liquor Control Commission. Dased on the information submitted in this application, is subject
of the business. If a partnership, one partner st	on or entity. If a corpo nail, in person, supering ponsibly manage and o athorized agent of the interest of th	ration, the manager stend the manager secate this beginner	ness. I intend to carry on the business authorized by the license shall superintend in person, the management and operation tent and operation of the business. I as a licensee, whether within any applicable laws, rules, regulations, or ordinances ontrol Commission.
sign-		sign	
Sign	 	here_	
here	-	sign here	
Subscribed in my presence and swom to before me (SEAL)	OFFILE ANMEEUA	SEAL BADESSA STATE OF HUNDIS CORRESSON 75/02	
In compliance with ADA, this application for L is available in other formats for persons with diten day advance period is requested in writing talternative format.	sabilities. A		Notary Public Signature

20. Principal Residence Since Age 18. All individe complete. If necessary, continue on separate where NAME	FROM (YEAR)		
See Attachment #1 Exhibit A	110/1/12/21	TO (YEAR)	RESIDENCE (CITY, STATE)
ndrew Lansing and Ellyn Lansing	((0.)	 	- JERIEN
awrence Lavy and Carol Levy (Wi		-	
obert Seiffert and Beverly A.		<u> </u>	MAR 12 2001
ana Rice and Andre Rice (Wife	Selffert (wif	e)	•
	_		CONTROL COMMISSION
PER	SONAL OATH AND C	בפעת 10 העפבער	LIGATION Fa parthership, all partners and spouses must sign and see must sign. Full names only initial.
unity of Cook above individual(s), being first duly sworn upon of (c(s)) the above and foregoing application, that said a statement is made in any part of this application, trasks Liquor Control Act.	oth, deposes 5) and seeing application has been rea the applicants 1 shall be	s) that the undersigned a and that the content dearned guilty of peri	ਤੋਂ is ਭਾਰ ਕੇਰ applicand st and/or spousers) ហំ applicand s) ਤੋਂ ਜ਼ਿਵਾਰਤੀ ਸਮਰੰਕੀ। statements contained therein are true, if ਪਿਨ੍ਹ ਮਿਹ sunject to penalties provided by law. 1555-131
	<u> </u>	,	and any date to periodice provided by law. 1555-131
hither par each of McDraska Liquor Control Comm	issien. Any documents	STATE OF MEDITALITY	records of every kind and description including police records of every kind and description including police records as waivers, any right or causes of action that
intherance of the application investigation or any of the Nebraska State Patrol. The understand understance light in the information contained herein is in individual owner. I shall supervise in person, myself and not as an agent for any other person widnal account if a partnership, one partner that yidnal account in the partner shall be account in	ission. Any documents of their investigation shall be and acknowledge man recomplete and or insection management and one or entity. If a corporation in the corporation of the corporati	records for the proposition of the proposition of the proposition of the husinger shallon, the manager shallon, th	State Paral, and any autor individual disclosing or related business or for any partner or stockholder that are net y upon demand to the Nebraska Liquor Control Commission the telegraphic submitted in this application, is subtituted to carry on the business authorized by the light superintend in person, the management of the light superintend in person, the management
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NEBRASKA LIQUOR CONTROL COMMISSION

Partnership Application for License RECEIVED

RECEIVED

th the STATE of Nebraska Liquor Control Commission will correspond, MAR – f. 2001 the STATE of Nebraska. MAR – 8 2001 NEBRASKA LIQUOR CONTROLL CONTROLL	Social Security-Nun	FEIN: 364193277 December 4, 1997	Percentage of Ownership	Not Applicable	Zip Code Driver's License Number State	60611 Not Applicable IL	Check Type of Partnership Joint Venture General Partnership X_Limited Partnership	Spouse's Social Security Number Spouse's Date of Birth	Continue on Reverse and List Remaining Partners
INSTRUCTIONS: (1) The Person listed as the primary partner will be the person with whom the Nebraska Liquor (1) At least one partner must meet residency requirements with the STATE of Nebraska. (2) Each Applicant and Spouse must attach two sets of fingerprint cards and proper fees. (3) All applications must be typewritten and submitted in triplicate.	st, Middle, Maiden). List any Previous Name	LEVY PREMIUM FOODSERVICE LIMITED PARTNERSHIP	Applicant's Home Address (1) Applicant's Home Address (2)	980 N. Michigan Ave., Ste. 400 Not Applicable	City	Chicago	Home Telephone Number Business Telephone Number 312 664 8200	ARE YOU MARRIED? IF YES, PLEASE COMPLETE. Spouse's Name (Last, First, Middle, Maiden). List Any Previous Names or Aliases Used Not Applicable	Spouses's Driver's License Number State Cont

FORM 35-4184 Page 1 Rev 11/99

Formation	Month Day Year		***************************************	12 22 1988				02 09 1989	26.33 35.33									
	Percentage of	Owiter simp		1%				266										Ž
	Social Security. Number	FELIN		36-3620524		the beautiful to the second		36-3628618										porations? x Yes information.
AND SPO	lephone	丁	State	11.	\$100 to 0.20 cm - 7		State	II			State				+			More Corporate
d. HER PARTNERS AND SPOUSES	Home Address and Te		Driver's License No.	, Not Applicable			Driver's License No.	nership N/A	1 i		Driver's License No.			3 May 19	Uriver's License and			tnership Consist of 1 or More Corporations?
If Married, Spouses must complete the spaces provided.	Name (last, first, middle, maiden) and any previous aliases or Names, Home Address and Telephone			See See Corporation Attach -	ment #1	980 N. Michigan Ave., Ste. 400 Chicago, IL 60611 (312)664-82		Levy Restaurant Limited Partn		980 N. Michigan Ave., Ste.400 Chicago, IL 60611 (312)664-82								Docs Your Partnersh
If Married, Spouses n	Name (last, first, middle, 1	Number			Spouse	1	Telephone Aumora		/Banturn)	ddress &		Partner	Spouse	Home Address & Telephone Number	, i	Spouse	Home Address & Telephone Number	

Corporation Application for License - Form 3 and 4

Nebraska Liquor Control Commission

INSTRUCTIONS:

1) Application and application for manager must be typewritten and submitted in triplicate.

2) Fingerprint cards (2 cards per person) must be submitted for each stockholder owning over 25% stock, chief executive officer, manager and all spouses. stock, chief executive officer, manager and all spouses.

3) Information regarding spouses must be completed; indicate if NOT married, or, spouse may provide an affidavit of NO interest if they have no interest at all, directly or indirectly, EBRASKA LIQUIDE

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MAR - 5 2001

if NOT married, or, spouse may provide

if NOT married, or, spouse may provide may be a spouse may be a spouse

☐ YES ☑ NO If yes, a certified copy of letter of exemption from the Is this corporation organized under the laws of Nebraska, not for profit, exempted from the payment of Federal Income Taxes as provided by Internal Revenue Service shall be attached to this application recognizing the exempt status of the corporation. Section (501)(c)(4), (7) or (8) Internal Revenue Code of 1954.

Name of Corporation That Will Hold Licenson Attach copy of State of Nebraska Registration.	itate of Nebraska	Registration.		Total Number of Shares. Attach Copies of Stock	ires. Attaeh	Gopies of Stock
LEVY GP CORPORATION, General Partner of	License Ho	artner of License Holder, Levy Premium Foodservice Limited Partnership	ď	1000		
Corporate Street Address (1) 980 N. Michigan Ave., Ste. 400 State groves to reference	1.4% 蛋	Corporate Street Address (2) N/A	ress (2)		Corporate (312)	Corporate Telephone Number (312) 664–8200
City Chicago	County Cook		State ILL	ILLINOIS	Zip Code 60611	50611
Name of Resident Agent CT Corporation System	<u> </u>	Name of Manager Rossman	er Ross	مار الا		
THIS SECTION	LIST THE NAV	HISSECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER	XECUTIVE O	1	\$ 15 M	
Name ANDREW J. LANSING		Title PRESIDENT	. <u>.</u> 12	Date of Birth 6-23-60		Social Security Number
Home:Address(1) 2440 North Lakeview	Home Address(2) N/A(G Tentland	2)		Driver's License Number L525-0106-0178	ımber 78	State IL
City Chicago	State IL	Zip Code 60614	Home Tetephone Number (312) 664-8200	ne Number -8200	Business Telephone Nu (312) 664-8200	Business Telephone Number (312) 664–8200

FORM 35-4183 Page 1 REV 11/99

Corporation Application for License - Form 3 and 4

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS AND SPOUSES	ECTORS, STOCKHOLDERS	AND SPOUSES		
Name of Officers, Directors, Spouses and Address. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title	Number of Shares
OFFICER'S NAME LEVY, LAWRENCE, FARRELL		02-01-44	Chafrman	., 0001
Spouse's Name LEVY, CAROL, NEIMS		07-01-42	None	0
OFFICER'S NAME LANSING, ANDREW, JAY		06-23-60	President	0
Spouse's Name LANSING, ELLYN, MANN		10-22-62	None	0
OFFICER'S NAME RICE. DANA, DIVINS		01-24-57	Secretary	0
Spouse's Name RICE, ANDRE		07-27-57	None	0
OFFICER'S NAME SELFFERT, ROBERT, ERNEST		11–23–51	Treasurer	0
Spouse's Name SEIFFERT, BEVERLY, ANN, BEIERWALTES		07-01-52	None	0
OFFICER'S NAME				
Spouse's Name				
OFFICER'S NAME				
Spouse's Name				

(If Necessary, Continue on Separate Sheet)

□ YES 🛋 NO
another Corporation?
Ġ
tion controlled
orpora
s this Co
S

If YES, LIST EACH SHAREHOLDER OWNING MORE THAN 25% stock in that corporation. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock.

(If needed use separate sheet)

Name of Control Corporation

Please indicate below your corporate tax year with the IRS.

Starting Date: January 1 Ending Date: December 31

Are any of the stockholders, officers, directors, or spouses ineligible personally to receive a license?

□ YES

□ NO

If YES, list the names of such persons and the reason(s) they are ineligible. Use Separate Sheet (If Applicable)

KNOW ALL MEN BY THESE PRESENTS: That LEVY GP CORPORATION

a corporation organized and doing business under the laws

County, Nebraska, does hereby nominate

Lancaster

of the State of Nebraska, with its registered corporate office in Lincoln

County, Nebraska, who is a registered agent and attorney-in-fact to represent the corporation before the Nebraska Liquor Control Commission, as required, specified, of Lancaster or provided for by section §53-126 of the Nebraska Liquor Control Act. and appoint CT CORPORATION SYSTEM

ITTINOIS

STATE OF NEBRASKA,

.

88

_County

Notary Public Signature & Seal

OFFICIAL SEAL
AIMEE LABADESSA
MOTARY PUBLIC, STATE OF KLINDIS
MY COMMITSION EXPRESS:04/15/02

PRESIDENT

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format

FORM 35-4183 PAGE 3 REV 11/99

Application for Corporate Manager

Must Be A Nebraska Resident Please submit in Triplicate

Return to:

Nebraska Liquor Control Commission, PO Box 95046

301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571 Fax: (402) 471-2814	Web addi	ress: htt	p://www.n	oLorg	/home/NL	CC/	,, .		ing water to a growing and the party of the second
	LIQUOR L	ICENSI	INFORM	ATI	ON Page 1	re teribility in		• j	
NAME C ^C LICENSED CORPORATION LIMITED PARTNERSHIP				CLASS	CLASS & LICENSE NUMBER				
LEVY PREMIUM FOODSERVICE LIMITED PARTNERSHIP				I	I				
TRADE NAME OF LICENSED PREMISE									
LEVY RESTAURANTS AT HAYMARKET P	ARK								
STREET ADDRESS OF LICENSED PREMISE CITY			COUNTY					2	IP CODE
999 North Sixth Street Lincoln		n	Lancaster		:		6	8508	
On behalf of the corporation, I designate this individu Signature of Corporate President/CEO:	al as corporat	e manage							
43									ion, General
APPLICANT	INFORM	ATTO	N (MUS	ŢBI	E 21 OR	OVEŘ) ···. V	44	No.
NAME (LAST, FIRST, MIDDLE, MAIDEN)	SEX	soci	AL SECUR	JTY N	IUMBER	DATE	F BIRT	н	PLACE OF BIRTH
Rossman, Rodney G.	F (M)					04/03/68		į	Atkinson, NE
HOME STREET ADDRESS		CITY			COUNTY		ST	ATE	ZIP CODE
5431 Rosebriar Court	,	Linc	Lincoln Lancast		er	N:	E	68516	
HOME TELEPHONE NUMBER (402) 328-9879	BUSINESS TELEPI		ONE NUM				IVERS LICENSE NUMBER & STATE 02126005 Nebraska		
SPOUSE'S INF	ORMAT	ION (I	F NOT M	/AR	RIED IN	IDICA'	ΓE)		
FULL NAME (LAST, FIRST, MIDDLE, MAIDEN)			SOCIAL SECURITY NUMBER		BER	DRIVERS LICENSE NUMBER & STATE			
N/A									
DATE OF BIRTH:			PLACE O	F BIR	IH:				
1. READ CAREFULLY - ANSWER FULL ever been convicted of or pled guilty to any crim or local law or ordinance. List the nature of the plea. Also list any pending charges at this time. YES NO	ninal charge charge, who	? Crimir	nal charge	means	any charge	e alleging	g a viola	ition	of a Federal, State
2. Have you or your spouse ever made application license number and date. YES NO						or license	e? IF Y	ES,	for what premise give
3. Have you or your spouse ever made a compro □YES ☑NO	mise settlen	ient for v	iolation of	sucn	iaws?				

	□ио							=
Have you	filed finger	print cards and PROPI	ER FEES (if	check, ma	ke out to the NE State Patrol), with	this application	on?	
ES	□NO							
		RESIDENCES SINC	E AGE 18,	APPLIC	ANT AND SPOUSE MUST COM	PLETE :		
PPLICANT:	CITY & STA	1.0		EAR TO	SPOUSE: CITY & STATE		YEAR OM TO	
Lincoln, Nebraska		1986	2001	N/A				
	111.00 1117							
		W Color	e de la compania del compania del compania de la compania del la compania de la compania del la compania d	the set of the	**************************************		<u> </u>	
		THE SECTION ASSESSMENT	PLOYERS	- LIST L	AST TWO EMPLOYERS			24.93
YE.	AR TO	NAME OF EMPLOYER			NAME OF SUPERVISOR	TELEPI	IONE NUMBER	
1995	2001	P.O. Pears			Bob Jergensen	(402)	476-8551	
1993	1995	Mulligans Golf	Grill &	Pub			423-5563	
plication, the plication, the de undersign d Federal), to quer Contro	nat said applicant(s) ne applicant(s) ned applicant hand bank or len	ation has been read and that shall be deemed guilty of per ereby consents to an investigat ding institution records, and so a and any other individual dis-	the contents the jury and subject tion of his/her baid applicant and closing or release	t to penalties ackground in f spouse waiv sing said info	ndersigned is the applicant and/or spouse of a statements contained therein are true. If any provided by law. (Sec. §53-131.01) Nebrash cluding all records of every kind and descriptive any rights or causes of action that said applicant to be filed.	ca Liquor Contro on including poli cant or spouse ma	i Act. ce records, tax records tax records	rds (: Nebr
ne undersigr		ay be attached, however, fing and acknowledge that any lice accurate.			rmation submitted in this application, is subje	ct to cancellation	if the information	cont
	\cap							_
	ton	(A)			Signature of Sno	use (if annlicab	(e)	
	J	ture of Applicant			Signature of Spo			
	J	and sworn to before me this	La_		Signature of Spo Subscribed in my presence and sworn to day of	before me this		

FROM: WOODS & RITKEN LAW 10005 FAX NO.: 402 437 8640 93-02-01 02:54P P.07

CORPORATION DIVISION

STATE CAPITOL SUITE 1305 . P.O.BOX 94608 . LINCOLN, NE - 68509 PHONE: (402)-471-4079 . FAX: (402)-471-3666

JOHN A. GALE Secretary of State

February 22, 2001

JULIE HELMUTH ... Office Manager

C T CORPORATION SYSTEM SUITE 500 301 SOUTH 13TH STREET LINCOLN, NE 68508

MAR -8 2001

NEBRASKA LIQUOR CONTROL COMMISSION

ACKNOWLEDGEMENT OF FILING

The attached documents were filed with the Nebraska Secretary of State's Office, Corporation Division. A label has been affixed to each filing signifying the filing stamp for the Nebraska Secretary of State's Office, Corporation Division. This filling label indicates the date and time of the filing and also references a document number that can be used to reference this filing in the future.

ACKNOWLEDGEMENT OF FILING FEES RECEIVED

Action/Service	Company/Entity Name	E . D
Foreign Authority	LEVY PREMIUM FOODSERVICE LIMITED	Fee Received
	PARTNERSHIP	200.00
Per Page Charge	LEVY PREMIUM FOODSERVICE LIMITED	
	PARTNERSHIP	5.00
	Total Fees Received	\$205.00

HEIDI Filing Officer

REGISTRATION OF FOREIGN LIMITED PARTNERSHIP TO TRANSACT BUSINESS

1000176728 Fgs 1
LEVY PREMIUM FOODSERVICE CIMIT
FILED 02:7272001 12 05 PM

Scott Moore Secretary of State 1301 State Capitol P.O. Box 94608 Lincoln, Nebraska 68509 402-471-4079

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MAR - 8 2001

Submit in Duplicate State Statute 87-281

NEBRASKA LIQUOR CONTROL COMMISSION

			OOM UOF COMINI22ION
Name of Limited Pa	rtnership <u>LEVY PREMIUM</u>	FOODSERVICE LIN	ITED PARTNERSHIP
	e laws of <u>ILLINOIS</u>		
Date of Formation	December 4, 1997		
Address of Principa	Office 980 North Mic	higan Avenue, Su	ite 400 Chicago, IL 60611
The second second second	CT Corporation System		
Registered Office	301 South 13th Street	, Suite 500 Linc	olu, NE 68508
	street address	city	zip
	Address of each of the Gigan Avenue, Suite 400		
			
			,
8. -)	SIGNATURE OF ONE G	ENERAL PARTNER R	EQUIRED:
State of <u>ILLINOTS</u>			
County of COOK			
Dana D. Rice	being duly	Sworn on oath depo-	ses and says that he/she is the
Secretary	of the shous no		
going application, kno verily believes.	ws the contents thereof, and	that the statements	r and that he/she has read the for Therein contained are true as he/sl
LEVY GP CORPORAT General Partner	CON	Signature	ico
Subscribed and sworr	to before me this7th	day of F	sbruary / 2001
Se	ai	June	Label
filing Fee: \$205 , 00		C	EE LABADESSA &

STATE CAPITOL SUITE 1305 • P.O.BOX 94608 • LINCOLN, NE • 68509 PHONE: (402)-471-4079 • FAX: (402)-471-3666

JOHN A. GALE Secretary of State

March 1, 2001

RECEMPERATED AND RECT.

C T CORPORATION SYSTEM SUITE 500 301 S. 13TH STREET LINCOLN, NE 685080000 MAR -8 2001

NEBRASKA LIQUOR CONTROL COMMISSION

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ACKNOWLEDGEMENT OF FILING FEES RECEIVED

Action/Service	Company/Enrity Name
Foreign Authority	LEVY GP CORPORATION Fee Received
Per Page Charge	LEVY GP CORPORATION 130.00
L	Total Fees Received 15.00
	\$145.00

JODY Filing Officer

	03-02-01 02:54P P.04
Lawrence F. Levy, Chairman Name/Title	Lawrence F. Levy Name
980 North Michigan Avenue, Suite 400 Address Chicago, IL 60611	980 North Michigan Ave., Ste. 400 Chicago, IL Address 60611
Andrew J. Lansing, President Name/Title	Name J. Lansing
980 N. Michigan Ave. Ste. 400 Chicago, II Address 60611	L 980 N. Michigan Ave., Ste. 400 Chicago, IL 60611 Address
Dana D. Rice, Secretary Name/Title	Robert E. Seiffert Name
980 North Michigan Ave., Ste. 400 Chicago Address IL 60611	Address Ace., Ste. 400 Chicago, IL 60611
Robert E. Seiffert, Treasurer Name Title	Name
980 N. Michigan Ave., Ste. 400 Chicago, Address IL 60611	Address
Name/Title	Name
Address	Address
Name/Title	Name
Address	Address
Name/Title	Name
Address	Address
Name/Title	Name
Address	Address
Name/Title	Name
Address	Address

Please Copy this page and submit additional pages if needed.

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NEBRASKA LIQUOR CONTROL COMMISSION

NEBRASKA LIQUOR CONTROL COMMISSION

SPOUSAL AFFIDAVIT OF NON PARTICIPATION IN A LIQUOR LICENSE

The spouse, CAROL N. LEVY acknowledges that he or she will have no interest, directly or (full name of spouse)

LEVY PREMIUM FOODSERVICE LIMITED PARTNERSHIP

indirectly, in any part of the daily operations or profit of the business DRA: LEVY RESTAURANTS AT HAYMARKEY

1959 N. SIXLH Street (name, trade name)

Lincolu, NE 60508

as prescribed in Sec. 53-125(13) of the Nebraska Liquor Control Act.

Address of business

Such individual shall not tend har, stock shelves, write checks, sign invoices, represent

themselves as an owner or in any other way participate in any part of the operation of the

licensed business. The licensee/applicant understands that he or she is responsible for compliance

with the conditions set out above, and that if such terms are violated, the Commission may cancel

Please waive prints for spouse.

Signature of non participating spouse

or revoke the license.

Signature of licensee/applicant

LARDENCE LEVY

MAR 12 2001

MAR - 6 2001

CONTROL COMMISSION

NEBRASKA LIQUOR CONTROL COMMISSION

SPOUSAL AFFIDAVIT OF NON PARTICIPATION IN A LIQUOR LICENSE

The spouse, ELLYN M. LANSING, acknowledges that he or she will have no interest, directly or LEVY PREMIUM FOODSERVICE LIMITED

indirectly, in any part of the daily operations or profit of the businessDBA: LEVY RESTAURANTS AT HAYMARKE

999 N. Sixth Street (name, trade name Lincoln, NE 60508 as prescribed in Sec. 53-125(13) of the Nebraska Liquor Control Act. & address of business)

Such individual shall not tend bar, stock shelves, write checks, sign invoices, represent

themselves as an owner or in any other way participate in any part of the operation of the

licensed business. The licensee/applicant understands that he or she is responsible for compliance

with the conditions set out above, and that if such terms are violated, the Commission may cancel

or revoke the license.

Plance waive prints for spouse.

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NEBRASKA LIQUOR CONTROL COMMISSION

SPOUSAL AFFIDAVIT OF NON PARTICIPATION IN A LIQUOR LICENSE

The spouse, Bev. A. Seiffert acknowledges that he or she will have no interest, directly or (full name of spouse)

LEVY PREMIUM FOODSERVICE LIMITED PARTNERSHIP indirectly, in any part of the daily operations or profit of the business DBA: LEVY RESTAURANTS AT HATMARKET 999 N. Sixth Street (name, trade name)

As prescribed in Sec. 53-125(13) of the Nebraska Liquor Control Act.

& address of business)

Such individual shall not tend bar, stock shelves, write checks, sign invoices, represent themselves as an owner or in any other way participate in any part of the operation of the licensed business. The licensee/applicant understands that he or she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

* Please waive prints for spouse.

Signature of non participating spouse

Signature of licensee/applications

Signature of licensee/applications

Signature of licensee/applications

Robert Scil

NO.324

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NEBRASKA LICUOR CONTROL COMM. SION

SPOUSAL AFFIDAVIT OF NON PARTICIPATION IN A LIQUOR LICENSE

The spouse Andre Rice	selfondedge that he as show 20 have				
(full fiame of spouse)	seknowledges that he or she will have no interest, directly or				
•,	TRAX BERRIOR AUGUSERATOR PINCLE				
indirectly, in any part of the daily	operations of profix of the business <u>URA: LEVY RESTAURANTS</u> AT				
999 MM Sixth Street	(name, trade harne Batharket Park				
& address of business) as prescribed in Sec. 53-125(13) of the Nebraska Liquer Control Act.					
Such individual shall not tend bar,	, stook shelves, write checks, sign involves, represent				
themselves as an owner or in any o	other way participate in any part of the operation of the				
licensed business. The licenses/ap	plicant understands that he of the is responsible for compliance				
with the conditions set out above,	and that if such terms are violated, the Commission may eared				
or revoke the license.					
* Please waive prints for,	spouse.				

Signature of non participating spouse.
MULLAND OF DANK RICE

DAWA RICE